PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
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| Effective on 17/08/2004. | | Complete if Known | | | |
|---|-------------|----------------------|------------------------|--|--|
| | | Application Number | 09/647,086-Conf. #4078 | | |
| | | Filing Date | September 26, 2000 | | |
| | | First Named Inventor | Yuji Sawada, et al. | | |
| | | Examiner Name | Matthew S. Gart | | |
| Applicant claims small entity status. See 37 CFR 1.27 | | Art Unit | 3625 | | |
| TOTAL AMOUNT OF PAYMENT | (\$) 450.00 | Attorney Docket No. | 55168-RCE (70551) | | |
| | | | | | |

| METHOD OF PAYMENT (check all that apply) | | | | | | | | |
|--|---|------------------------|----------|----------------------|----------------|------------------------|--------------|---------------|
| Check Credit Card Money Order Other (please identify): | | | | | | | | |
| x Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards & Angell, LLP | | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | | |
| x Charge fee(s) | indicated bel | ow | | Charg | e fee(s) indic | ated below, ex | cept for t | ne filing fee |
| Charge any ac | dditional fee(s |) or underparand 1.17 | yment of | x Credit | any overpay | ments | | |
| FEE CALCULATION | | | | | | | | |
| 1. BASIC FILING, SEARCH | I, AND EXAM | INATION FE | ES | | | | | |
| | | S FEES Small Entity | SEAR | CH FEES Small Entity | EXAMINA | TION FEES Small Entity | | |
| Application Type | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fees F | Paid (\$) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FEES | | | | | | | - 400 | Small Entity |
| Fee Description | | | | | | | Fee (\$) | Fee (\$) |
| Each claim over 20 (includi Each independent claim over | | | | | | | 50 | 25 |
| Multiple dependent claims | er 5 (including | g Keissues) | | | | | 200 360 | 100 180 |
| • • | Claims Fo | no (\$) | Fee Paid | I (¢) | Mul | tiple Depende | | 160 |
| - 20 = | | e (\$) _ | reerall | (*) | Fee | | ee Paid (\$ | 3 |
| -20- | ^ _ | | | | 100 | 747 - | 00 / 0.0 (4 | 1 |
| Indep. Claims Extra | Claims Fe | ee (\$) | Fee Paid | (\$) | - | | | ~- - |
| -3= | x | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | | |
| If the specification and dra | | | | | | | | · · |
| listings under 37 CFR I sheets or fraction thereo | | | | | or small enti | ty) for each ad | iditional 30 | , |
| | tra Sheets | , , , , | | ional 50 or frac | tion thereof | Fee (\$) | Fee I | Paid (\$) |
| - 100 = /50 (round up to a whole number) x = | | | | | | | | |
| 4. OTHER FEE(S) | | | | | | Paid (\$) | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | | |
| Other (e.g., late filing su | Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00 | | | | | 0.00 | | |
| | | | | | | | | |

| SUBMITTED BY | | | | |
|-------------------|--|--------|-----------|----------------|
| Signature | Buril a. Turge Registration No. (Attorney/Agent) | 27,840 | Telephone | (617) 517-5508 |
| Name (Print/Type) | David A. Tucker | | Date | April 11, 2005 |

PTO/SB/22 (12-04) Approved for use through 7/31/2006. OMB 0651-0031

| | ' | | isplays a valid OMB control num | | | |
|--|---|--|--|--|--|--|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | , | Docket Number (Optional) 55168-RCE (70551) | | | |
| Application Number 09/6 | 647,086-Conf. #4078 | Filed Se | eptember 26, 2000 | | | |
| | M AND DATA SELLING APPARA DATA DETECTING SYSTEM, AN | | | | | |
| Art Unit 3625 | | Examiner | Matthew S. Gart | | | |
| This is a request under the provisions of the dentified application. The requested extension and fee are a | | | | | | |
| · | <u>Fee</u> | Small Entity Fee | | | | |
| One month (37 CFR 1.17) | | \$60 | \$ | | | |
| X Two months (37 CFR 1.17 | 7(a)(2)) \$450 | \$225 | \$ 450.00 | | | |
| Three months (37 CFR 1. | 17(a)(3)) \$1020 | \$510 | \$ | | | |
| Four months (37 CFR 1.17 | 7(a)(4)) \$1590 | \$795 | \$ | | | |
| Five months (37 CFR 1.17 | 7(a)(5)) \$2160 | \$1080 | \$ | | | |
| Applicant claims small entity sta | atus. See 37 CFR 1.27. | | | | | |
| A check in the amount of the fee | • | | | | | |
| Payment by credit card. Form F | | | | | | |
| | authorized to charge fees in this | application to a Dep | posit Account. | | | |
| The Director is hereby authorized Deposit Account Number | ed to charge any fees which may 04-1105 . I have encl | be required, or cred losed a duplicate co | | | | |
| I am the applicant/inventor | or. | | | | | |
| арриоантични | | | | | | |
| assignee of reco | ord of the entire interest. See 37 under 37 CFR 3.73(b) is enclosed | | 3) . | | | |
| assignee of reco | ord of the entire interest. See 37 | d. (Form PTO/SB/96 | 5). | | | |
| assignee of reconstance of statement under attorney or ager | ord of the entire interest. See 37 under 37 CFR 3.73(b) is enclosed int of record. Registration Number int under 37 CFR 1.34. | d. (Form PTO/SB/96 er | 5). | | | |
| assignee of reconstance of reconstan | ord of the entire interest. See 37 under 37 CFR 3.73(b) is enclosed int of record. Registration Number in tunder 37 CFR 1.34. | d. (Form PTO/SB/96 | 5). | | | |
| assignee of reconstance of reconstan | ord of the entire interest. See 37 under 37 CFR 3.73(b) is enclosed int of record. Registration Number in tunder 37 CFR 1.34. | d. (Form PTO/SB/96 er | il 11, 2005 | | | |
| assignee of reconstance of statement under attorney or ager | ord of the entire interest. See 37 under 37 CFR 3.73(b) is enclosed int of record. Registration Number int under 37 CFR 1.34. Imber if acting under 37 CFR 1.34 | d. (Form PTO/SB/96 er | · · · · · · · · · · · · · · · · · · · | | | |

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Total of

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450.00 DA

forms are submitted.